

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	202005	7-29-99
O.I.P.E. CLASSIFIER		70619	1-13-99
FORMALITY REVIEW			8/19/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Claim	Final	Original	Date
1			1-1-99
2			4-1-99
3			11-1-99
4			6-6-01
5			12-3-99
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Claim	Final	Original	Date
51			11-6-01
52			11-2-99
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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